Department of Labor Office of Labor Management Standards Washington DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No 1215-0188 Expires 11-30-2006

This report is mandatory under P L 86-257 as amended Failure to comply may result in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

E MS DEST	
1 File Number U 5869	2 Fiscal Year Covered From
We accord to appropriate of	1 / 1 / 2005 Through 12 / 31 / 2005
3 Name and address of person filing	4 Name file number and address of labor organization
Name Richard _ C Ferlauto	Name AMERICAN FEDERATION of STATE COUNTY & MUNICIPL
	Labor Organization File Number 000-289
PO Box Bidg Room No if any AFSCME	PO Box Building and Room Number if any
Street 1625 L Street NW =	Street 1625 L Street NW = = -
City Washington 4	City Washington 1 1
State District_of Columbia ZIP Code + 4 20036 -	State District of Columbia = ZIP Code + 4 20036
5 Position in labor organization MANAGER	
monetary value from an employer whose employees your organization	Ion represents or is actively seeking to represent
(except as specified in the exclusions set forth in the Instructions) A. Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of	
monetary value from an employer whose employees year e-games	
6 Name and address of Employer (including trade name, if any)	7 a Nature of Interest Transaction or Income
6 Name and address of Employer (including trade name if any)	
Name Jay Eisenhoffer	
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Name Jay Eisenhoffer	Speaking of Conference Sournavies Winter Conference Franklandhotel
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Name Jay Eisen roffer Trade Name if any Grantz Eisen hoffer PO Box Bldg Room No if any Scite 2100	Speaken et Conference Governances Scrimen Conference Winter Conference Franklandhotel
Name Jay Eisenhoffer Trade Name if any Grant Eisenhoffer PO Box Bldg Room No if any Scite 2100 Street Worth Market State	Scrimen Contenence Scrimen Contenence Winter Contenence Thanklandhotel
Name Jay Eisenhoffer Trade Name if any Grant Eisenhoffer PO Box Bldg Room No if any Scite 2100 Street 201 North Market State City Wilminster State 21980	Scrimen Contenence Scrimen Contenence Winter Contenence Thank and hotel
Name Jay Eisenhoffer Trade Name if any Grant Eisenhoffer PO Box Bldg Room No if any Suite 2100 Street 201 North Market Share City Wilmington, ZIP Code + 4 1980 State 15. Signature and verification. The undersigned declares under penalty.	Speaker of Conference Scrimen Conference Link text Conference Thank and hotel The Amount The print and other applicable penalties of the law that all of the information rying documents) has been examined by the signatory and is to the best of the
Name Jay Eisenhoffer Trade Name if any Grant Eisenhoffer PO Box Bldg Room No if any Suite 2/00 Street William Str. City William Str. State ZIP Code + 4 1980 State Street Including the information contained in any accompany accompany.	Speaker of Conference Scrimer Conference Winter Conterence + Dave and hotel 7 b Amount Ferjury and other applicable penalties of the law that all of the information pring documents) has been examined by the signatory and is to the best of the